

# CLAIMS ONLY

Application Number

Filing Date

10/7/12, 4/9

Applicant(s)

REV

\* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
1	/		/	/		
2		/		/		
3		/		/		
4		/		/		
5		/		/		
6		/		/		
7		/		/		
8		/	/			
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50						
Total Indep	2		3			
Total Depend	11		22			
Total Claims	13		25			

  

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	Indep	Depend	Indep	Depend	Indep	Depend
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Total Indep						
Total Depend						
Total Claims						